**Technology Control Plan Certification**

Principal Investigator:

Department:

Sponsor Name:

Project Title:

It has been determined a Technology Control Plan (TCP) is necessary for this project. This is to acknowledge I have read and understand the [Briefing on the Handling of Export-Controlled Information](http://www.uh.edu/research/compliance/export-controls/handling-ec-info/), and that I agree to comply with the requirements of the attached TCP.

Name Title/Role

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Signature Date

Name Title/Role

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Signature Date

Acknowledgement of Principal Investigator:

Name Title/Role

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_

Signature Date

**Return this document and TCP to the Executive Director of the Office of Contracts and Grants. Mail Code 2015.**